

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**

SERIAL NO. 10766860  
APPLICANT(S)

FILING DATE

**CLAIMS**

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT										
	IND	DEP	IND	DEP	IND	DEP		IND	DEP	IND	DEP	IND	DEP	IND	DEP
1	1✓														
2		1✓													
3	1✓														
4		2✓													
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47	1✓														
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50															
TOTAL IND.	21														
TOTAL DEP.	56														
TOTAL CLAIMS	73														
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